



16:08

LSI LOGIC LEGAL IP → 917037464000

NO. 264 P002

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** **Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax** **(703) 746-4000**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

24319 7590 09/14/2004

**LSI LOGIC CORPORATION**  
**1621 BARBER LANE**  
**MS: D-106 LEGAL**  
**MILPITAS, CA 95035**

12/03/2004 BSAYAS12 00000063 122252 10039508

01 FC:1501 1370.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Manu Kashyap	(Depositor's name)
<i>Manu Kashyap</i>	(Signature)
12/02/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/039,508	11/09/2001	Kunal N. Tamvade	01-719	8909

TITLE OF INVENTION: ADJUSTABLE TRANSMISSION PHASE SHIFT MASK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
Nonprovisional	NO	\$1330	\$0	\$1330	12/14/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
BARRECA, NICOLE M	1756	430-005000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.
2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
- 1 Luedeka, Neely & Graham  
2 \_\_\_\_\_  
3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

LSI Logic Corporation

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Milpitas, California USA

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

## 4a. The following fee(s) are enclosed:

- Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies \_\_\_\_\_

## 4b. Payment of Fee(s):

- A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-22252 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature 25 Nov

Date December 2, 2004

Typed or printed name Timothy Croll

Registration No. 36,771

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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NO. 264 D001

LSI LOGIC

## FAX COVER SHEET

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**LSI LOGIC CORPORATION**  
Office of General Counsel  
1621 Barber Lane  
M/S D-106  
Milpitas, CA 95035  
Fax: (408) 433-7460

Date: December 2, 2004  
To Name: USPTO – Box: Issue Fee  
Fax: (703) 746-4000  
Phone: (703) 305-8283

From: Name: Manu Kashyap, Intellectual Property Paralegal  
Corporate Legal Dept.  
Telephone: (408) 433-7475  
Fax: (408) 433-7460

Re: 10/039,508

Number of Pages Including this Page 3

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**MESSAGE:****US Serial No.: 10/039,508****Filing Date: 11/09/2001****Group Art Unit: 1756****Docket No. 01-719****Examiner: Nicole Barreca****Payment of Issue Fee**

Please notify us immediately if any pages are not received.



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NO. 264 D003

PTO/SB/17

Approved for use through 9/30/2000. OMB 0651-0032  
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# FEE TRANSMITTAL

Patent Fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB-09-12. See 37 C.F.R. 1.27 and 1.29.

**TOTAL AMOUNT OF PAYMENT** **(\$1330.00)**

Complete if Known	
Application Number	10/039,508
Filing Date	November-09, 2001
First Named Inventor	Kunal Taravade
Group Art Unit	1756
Examiner Name	Nicole M. Barreca
Attorney Docket No.	56880.US / 01-719

**METHOD OF PAYMENT (check one)**

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payment to:

Deposit Account Number **12-2252**Deposit Account Number **LSI LOGIC CORPORATION**
 Charge Any Additional Fee required Under 37 C.F.R. 1.16 at the Mailing of the Notice of

2.  Payment Enclosed:

 Chec  Money Order  Other

**FEE CALCULATION**
**1. BASIC FILING FEE**

Larg eFee Code (\\$)	Entit yFee Code (\\$)	Larg eFee Code (\\$)	Entit yFee Code (\\$)	Fee Description	Fee Paid
101	790	201	395	Utility filing fee	
106	330	206	165	Design filing fee	
107	540	207	270	Plant filing fee	
108	790	208	355	Reissue filing fee	
114	150	214	75	Provisional Filing fee	

**SUBTOTAL (1) (\$ 0.00)**
**2. EXTRA CLAIM FEES**

Total claim	-20**=	Extra Claim	Fee from below	Fee Paid
Independen	-3**=			
tClaims				
Multiple Dependent				

\*\*or number previously paid, if greater; For Reissues, see below

Larg eFee Code (\\$)	Entit yFee Code (\\$)	Larg eFee Code (\\$)	Entit yFee Code (\\$)	Fee Description
103	22	203	11	Claims in excess of 20
102	82	202	41	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	82	209	41	**Reissue independent claims over original patent
110	22	210	11	**Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$ 0.00)**
**FEE CALCULATION (continued)**
**3. ADDITIONAL FEES**

Larg eFee Code (\\$)	Entit yFee Code (\\$)	Larg eFee Code (\\$)	Entit yFee Code (\\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing request for reexamination	
112	920*	112	920	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	950	217	475	Extension for reply within third month	
118	1,510	218	755	Extension for reply within fourth month	
128	2,060	228	1,030	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	65	Petition to revive - unavoidable	
141	1,320	241	680	Petition to revive - unintentional	
142	1,320	242	660	Utility issue fee (or reissue)	1330
143	450	243	225	Design issue fee	
144	870	244	335	Plant issue fee	
122	130	122	130	Petitions to the Commission	
123	50	123	50	Petitions related to provisional application	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129)	
149	790	249	395	For each additional invention to be examined (37 CFR 1.129 (b))	
Other fee (specify)					PUBLICATION FE
Other fee (specify)					

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$1330.00)**
**SUBMITTED BY**
**Complete (if applicable)**

Typed or printed name	<b>Timothy Croll</b>	Reg. Number	<b>36,771</b>
Signature	<i>Timothy Croll</i>	Date	2 Dec 04

Deposit Account User ID

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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PAGE 3/3 \* RCV'D AT 12/2/2004 7:11:33 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-2/1 \* DNI:7464000 \* CSID:4084337460 \* DURATION (mm:ss):01:32